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**REQUEST FOR WITHDRAWAL  
AS ATTORNEY OR AGENT  
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Application Number	10/801,990
Filing Date	March 15, 2004
First Named Inventor	
Art Unit	1641
Examiner Name	
Attorney Docket Number	SURR.121

**To: Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450**

Please withdraw me as attorney or agent for the above identified patent application, and

- ☒ all the attorneys/agents of record.
- ☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
- ☐ the attorneys/agents associated with Customer Number

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

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Name	Darla G. Yoerg	Registration No.	48,053
Date	February 22, 2005	Telephone No.	303-268-0066

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

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